

WORK EXPERIENCE

Including military service and/or unpaid jobs

(Start with your present position and work back 10 years. Use additional pages if necessary.)

May we contact your present employer? ☐ Yes ☐ No

A.

Dates of Employment (<i>month, day, year</i>) From: _____ To: _____	Number of hours worked per week:	Exact Title of Your Position
Salary or Earnings Starting \$ _____ Per _____ <div style="text-align: right;">Final \$ _____ Per _____</div>	Classification Grade/Level <i>(If in Federal Service)</i>	Kind of Business or Organization
Name and Address of Employer (<i>firm, organization, etc.</i>)		Name, Title & Telephone Number of Immediate Supervisor
Business Telephone: Area Code Number		Number of Employees You Supervised
Reason for Leaving		
Description of Work		

B

Dates of Employment (<i>month, day, year</i>) From: _____ To: _____	Number of hours worked per week:	Exact Title of Your Position
Salary or Earnings Starting \$ _____ Per _____ <div style="text-align: right;">Final \$ _____ Per _____</div>	Classification Grade/Level <i>(If in Federal Service)</i>	Kind of Business or Organization
Name and Address of Employer (<i>firm, organization, etc.</i>)		Name, Title & Telephone Number of Immediate Supervisor
Business Telephone: Area Code Number		Number of Employees You Supervised
Reason for Leaving		
Description of Work		

C.

Dates of Employment (<i>month, day, year</i>) From: _____ To: _____		Number of hours worked per week:	Exact Title of Your Position
Salary or Earnings Starting \$ _____ Per _____ Final \$ _____ Per _____		Classification Grade/Level (<i>If in Federal Service</i>)	Kind of Business or Organization
Name and Address of Employer (<i>firm, organization, etc.</i>)			Name, Title & Telephone Number of Immediate Supervisor
Business Telephone: Area Code Number			Number of Employees You Supervised
Reason for Leaving			
Description of Work			

D.

Dates of Employment (<i>month, day, year</i>) From: _____ To: _____		Number of hours worked per week:	Exact Title of Your Position
Salary or Earnings Starting \$ _____ Per _____ Final \$ _____ Per _____		Classification Grade/Level (<i>If in Federal Service</i>)	Kind of Business or Organization
Name and Address of Employer (<i>firm, organization, etc.</i>)			Name, Title & Telephone Number of Immediate Supervisor
Business Telephone: Area Code Number			Number of Employees You Supervised
Reason for Leaving			
Description of Work			

E.

Dates of Employment (<i>month, day, year</i>) From: _____ To: _____	Number of hours worked per week:	Exact Title of Your Position
Salary or Earnings Starting \$ _____ Per _____ Final \$ _____ Per _____	Classification Grade/Level (<i>If in Federal Service</i>)	Kind of Business or Organization
Name and Address of Employer (<i>firm, organization, etc.</i>)		Name, Title & Telephone Number of Immediate Supervisor
Business Telephone: Area Code Number		Number of Employees You Supervised
Reason for Leaving		
Description of Work		

F.

Dates of Employment (<i>month, day, year</i>) From: _____ To: _____	Number of hours worked per week:	Exact Title of Your Position
Salary or Earnings Starting \$ _____ Per _____ Final \$ _____ Per _____	Classification Grade/Level (<i>If in Federal Service</i>)	Kind of Business or Organization
Name and Address of Employer (<i>firm, organization, etc.</i>)		Name, Title & Telephone Number of Immediate Supervisor
Business Telephone: Area Code Number		Number of Employees You Supervised
Reason for Leaving		
Description of Work		

14. a. Do you have a high school diploma? ☐ Yes ☐ No GED equivalent? ☐ Yes ☐ No

If yes, Date of Completion _____

b. Name and location of colleges or universities attended	Dates Attended	Number of Credit Hours		Degree	Date Received	Grade Point Average and/or scholastic standing
		Quarter	Semester			
Major Undergraduate Subjects	Credit Hours	Major Graduate Subjects			Credit Hours	
	Quarter Semester				Quarter Semester	

c. Special skills, accomplishments, awards, honors, fraternities, sororities & societies (Specify) ☐ Yes ☐ No

d. Other schools or training such as trade, vocational, Armed Forces, or business. Give for each: Name and location of school, dates attended, subject studies, certificates, and any other pertinent data.

15. Fluent in foreign language(s): Speak ☐ Yes ☐ No Read ☐ Yes ☐ No Write ☐ Yes ☐ No

If yes, what languages: _____

16. Can you type? ☐ Yes ☐ No If yes, WPM: _____

17. List software applications with which you are proficient: _____

18. List hardware you have used: _____

19. Describe other automation/network skills: _____

REMARKS

(Use this space for continuation of answers. List the number or letter of items being continued.)

REFERENCES

NAME	ADDRESS & TELEPHONE NUMBER	RELATIONSHIP

APPLICANT CERTIFICATION:

I certify that, to the best of my knowledge and belief, all of the information on and attached to this application is true, correct, complete and made in good faith. I understand that false or fraudulent information on or attached to this application may be grounds for not hiring me, or firing me after I begin work, and may be punishable by fine or imprisonment. I understand that any information I give may be investigated.

SIGNATURE**DATE SIGNED** _____

(To be signed at interview if electronically submitted)

DATE SUBMITTED _____